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## Declaration for Patent Application

Docket Number: 0623.0950000/EKS/GLL

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated below next to my name.

I believe I am the original, first and joint inventor of the subject matter that is claimed and for which a patent is sought on the invention entitled **Predictive Test for Pre-Eclampsia**, the specification of which is attached hereto unless the following box is checked:

- ☒ was filed on December 7, 2000;  
as United States Application Number 09/719,055 of PCT International Application Number PCT/GB99/01828;  
Filed: June 9, 1999; and  
was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information that is material to patentability as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application, which designated at least one country other than the United States listed below, and have also identified below any foreign application for patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)			Priority Claimed
<u>9812432.4</u> ✓ (Application No.)	<u>Great Britain</u> ✓ (Country)	<u>9 June 1998</u> ✓ (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Application No.)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

_____ (Application No.)	_____ (Filing Date)
_____ (Application No.)	_____ (Filing Date)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or under § 365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information that is material to patentability as defined in 37 C.F.R. § 1.56 that became available between the filing date of the prior application and the national or PCT international filing date of this application.

_____ (Application No.)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)
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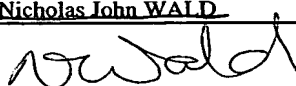
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Direct Telephone Calls to:

(202) 371-2600

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor	<u>Nicholas John WALD</u>	
Signature of sole or first inventor		<u>27 Feb 01</u> Date
Residence	<u>London, United Kingdom GBX</u>	
Citizenship	<u>United Kingdom</u>	
Mailing Address	Department of Environmental and Preventive Medicine St Bartholomew's Hospital Queen Mary & Westfield College Charterhouse Square London, United Kingdom EC1M 6BQ	
Full name of second inventor	<u>Christopher REDMAN</u>	
Signature of second inventor		Date
Residence	<u>Oxford, United Kingdom GBX</u>	
Citizenship	<u>United Kingdom</u>	
Mailing Address	Nuffield Department of Obstetrics and Gynaecology University of Oxford John Radcliffe Hospital Headington Oxford, United Kingdom OX3 9DU	

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Full name of sole or first inventor	Nicholas John WALD
Signature of sole or first inventor	Date
Residence	London, United Kingdom
Citizenship	United Kingdom
Mailing Address	Department of Environmental and Preventive Medicine St Bartholomew's Hospital Queen Mary & Westfield College Charterhouse Square London, United Kingdom EC1M 6BQ
Full name of second inventor	Christopher REDMAN
Signature of second inventor	April 9, 2001 Date
Residence	Oxford, United Kingdom GBX
Citizenship	United Kingdom ✓
Mailing Address	Nuffield Department of Obstetrics and Gynaecology University of Oxford John Radcliffe Hospital Headington Oxford, United Kingdom OX3 9DU